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## BIB DATA SHEET

CONFIRMATION NO. 9530

SERIAL NUMBER	FILING or 371(c) DATE	CLASS	GROUP ART UNIT	ATTORNEY DOCKET NO.
10/587,086	07/21/2006	544	1621	CP404A
<b>RULE</b>				
<b>APPLICANTS</b> Magali Bourghol Hickey, Medford, MA; Matthew Peterson, Hopkinton, MA; Orn Almarsson, Shrewsbury, MA; Mark Oliveira, Framingham, MA;				
<b>** CONTINUING DATA *****</b> This application is a 371 of PCT/US05/02782 02/01/2005 which claims benefit of 60/542,752 02/06/2004 and claims benefit of 60/560,411 04/06/2004 and claims benefit of 60/573,412 05/21/2004 and claims benefit of 60/579,176 06/12/2004 and claims benefit of 60/581,992 06/22/2004 and claims benefit of 60/586,752 07/09/2004 and claims benefit of 60/631,786 11/30/2004				
<b>** FOREIGN APPLICATIONS *****</b> UNITED STATES OF AMERICA PCT/US04/29013 09/04/2004				
<b>** IF REQUIRED, FOREIGN FILING LICENSE GRANTED **</b> 10/07/2008				
Foreign Priority claimed <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No 35 USC 119(a-d) conditions met <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No Verified and /SHAIENDRA KUMAR/ Acknowledged Examiner's Signature	<input type="checkbox"/> Met after Allowance Initials	<b>STATE OR COUNTRY</b>  MA	<b>SHEETS DRAWINGS</b>  12	<b>TOTAL CLAIMS</b>  30
<b>INDEPENDENT CLAIMS</b>  13				
<b>ADDRESS</b>  Ross J. Oehler CEPHALON, Inc. 41 MOORES ROAD PO BOX 4011 FRAZER, PA 19355 UNITED STATES				
<b>TITLE</b>  Modafinil compositions				
<b>FILING FEE RECEIVED</b>  2800	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:		<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees (Filing) <input type="checkbox"/> 1.17 Fees (Processing Ext. of time) <input type="checkbox"/> 1.18 Fees (Issue) <input type="checkbox"/> Other _____ <input type="checkbox"/> Credit	